

# ACCOUNT OPENING FORM

This form should be completed in CAPITAL LETTERS using BLACK INK.  
 Characters and marks should be similar in style to the following ABC

## Category of Account:

(Tick as appropriate)

Individual ☐ Joint ☐ Fixed Investment ☐ Others ☐ (Please specify) \_\_\_\_\_

## Type of Account

(Please tick as appropriate)

Individual Current ☐ Instant Savings Tier 1 ☐ Instant Savings Tier 2 ☐ Premier Savings ☐ Premium Current ☐ Gold Current ☐ Domiciliary ☐  
 Solo ☐ High Interest Deposit Account ☐ Early Savers Tier 2 ☐ Early Savers Tier 3 ☐ Evergreen ☐ Every Day Banking ☐ Forris Xtra ☐

\$	€	¥	£
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Branch \_\_\_\_\_ Account No. (for official use only) \_\_\_\_\_ BID : \_\_\_\_\_

## 1. PERSONAL INFORMATION

Title: \_\_\_\_\_ Surname: \_\_\_\_\_  
 First Name: \_\_\_\_\_  
 Middle Name: \_\_\_\_\_  
 Marital Status: (please tick) Single ☐ Married ☐ Others ☐ (please specify) \_\_\_\_\_ Gender: F ☐ M ☐  
 Mother's Maiden Name: \_\_\_\_\_  
 State of Origin: \_\_\_\_\_ Local Council: \_\_\_\_\_  
 Nationality : (for non American) \_\_\_\_\_ Resident permit No. \_\_\_\_\_  
 Issue Date: DD MM YYYY Expiry Date: DD MM YYYY Date of Birth: DD MM YYYY  
 Tax Identification Number (TIN) \_\_\_\_\_ Purpose of Account: \_\_\_\_\_  
 Do you have dual citizenship? Yes ☐ No ☐ If yes, please specify \_\_\_\_\_  
 If US Citizen/Resident, please provide Social Security Number: \_\_\_\_\_

## 2. CONTACT DETAILS

Residential Address  
 House Number: \_\_\_\_\_ Street Name: \_\_\_\_\_  
 Landmark: \_\_\_\_\_ City/Town: \_\_\_\_\_  
 Local Council: \_\_\_\_\_ State: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 E-mail address: \_\_\_\_\_  
 Mobile No.: \_\_\_\_\_ Phone No.: \_\_\_\_\_

## 3. VALID MEANS OF IDENTIFICATION

National ID Card ☐ National Driver's License ☐ International Passport ☐ Voter's Card ☐  
 \* Others (please specify) \_\_\_\_\_ ID No.: \_\_\_\_\_  
 Issue Date: DD MM YYYY Expiry Date: DD MM YYYY

\*People in peculiar circumstances Artisans, Petty Traders, Students who may not have the prescribed ID's

#### 4. DETAILS OF NEXT OF KIN

Title:  Surname:

Middle Name:  First Name:

Relationship:  Gender: F ☐ M ☐

Date of Birth:         Mobile No.:

E-mail address:

#### Contact Details

House Number:  Street Name:

Landmark:  City/Town:

Local Council  State:

2.

#### 6. DECLARATION

I/We hereby apply for the opening of account(s) with Forris Online Bank. I/We understand that the information given herein and the documents supplied are the basis for opening such account (s) and I/We therefore warrant that such information is correct.

I/We further undertake to indemnify the Bank for any loss suffered as a result of any false information or error in the information provided by the Bank.

Name:  Signature:  Date:

Name:  Signature:  Date:

# Unlocking Possibilities, Building Relationships